## FILING DATE SERIAL NO. APPLICANT(S) **CLAIMS ONLY** CLAIMS AFTER 2nd AMENDMENT AFTER 1st AMENDMENT AS FILED IND. DEP. DEP. IND. IND. IND. DEP. DEP. IND. IND. DEP. 2 3 4 $\overline{\phantom{a}}$ ø ł ŧ \* .30 - 12 81 -31 ^ TOTAL IND. J \_1 TOTAL DEP. TOTAL CLAIMS \* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS